

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

16805
09/04/03

OLIFF & BERRIDGE, PLC
P.O. Box 19928
Alexandria, Virginia 22320
Telephone: (703) 836-6400
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Attorney Docket No.: 117030

Date: September 4, 2003

MAIL STOP PATENT APPLICATION

Customer Number: 25944

NONPROVISIONAL APPLICATION TRANSMITTAL
RULE §1.53(b)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

15757 U.S. PTO
10/654423
09/04/03

Sir:

Transmitted herewith for filing under 37 C.F.R. §1.53(b) is the nonprovisional patent application

For (Title): INPUT DEVICE, INFORMATION DEVICE, AND CONTROL INFORMATION
GENERATION METHOD

By (Inventors): Daisuke SATO and Tomio IKEGAMI

Formal drawings (Figs. 1-19; 19 sheets) are attached.
 Use Figure _____ for front page of Publication.

A Declaration and Power of Attorney is filed herewith.

This application claims benefit of Provisional Application No. _____ filed _____.
 (A Preliminary Amendment is attached to reflect this claim in the Specification if not already present.)

This patent application is assigned to SEIKO EPSON CORPORATION.
 The executed Assignment is filed herewith.

An Information Disclosure Statement is filed herewith.

Entitlement to small entity status is hereby asserted.

A Preliminary Amendment is filed herewith.

Priority of foreign application No. 2002-277455 filed September 24, 2002 in Japan is claimed (35 U.S.C. §119).
 A certified copy of the above corresponding foreign application is filed herewith.

This application is NOT to be published under 35 U.S.C. 112(b). The undersigned attorney or agent hereby certifies that the invention disclosed in this application has not been and will not be the subject of an application filed in another country, or under a multilateral international agreement, that requires publication at eighteen months after filing.

The filing fee is calculated below:

CLAIMS IN THE APPLICATION AFTER ENTRY OF
ANY PRELIMINARY AMENDMENT NOTED ABOVE

FOR:	NO. FILED	NO. EXTRA
BASIC FEE		
TOTAL CLAIMS	20 - 20	= 0*
INDEP CLAIMS	6 - 3	= 3*
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS PRESENTED		

* If the difference is less than zero, enter "0".

SMALL ENTITY

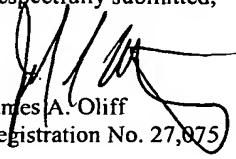
RATE	FEES
	\$ 375
x 9 =	\$
x 42 =	\$
+ 140 =	\$
TOTAL	\$

OTHER THAN A
SMALL ENTITY

OR	RATE	FEES
OR		\$ 750
OR	x 18	\$
OR	x 84	\$ 252
OR	+ 280	\$
OR	TOTAL	\$ 1002

Check No. 145865 in the amount of \$1002.00 to cover the filing fee is attached. Except as otherwise noted herein, the Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,


 James A. Oliff
 Registration No. 27,075

 Joel S. Armstrong
 Registration No. 36,430

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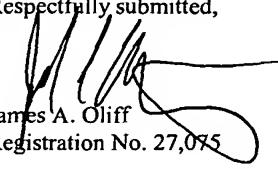
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